

OFFICE OF GENERAL

2002 DEC 23 P 12: 45

December 23, 2002

VIA HAND-DELIVERY

Lawrence H. Norton, Esq. General Counsel **Federal Election Commission** 999 E Street, NW Washington, DC 20463

Re: FEC Complaint - MUR 5322

Dear Mr. General Counsel:

Arent Fox Kintner Plotkin & Kahn, PLLC 1050 Connecticut Avenue, NW Washington, DC 20036-5339 Phone 202/857-6000 Fax 202/857-6395 www.arentfox.com

Craig Engle 202/775-5791 engle craig@arentfox com

Scott S. Ward 202/715-8414 wards@arentfox.com

This letter is in response to the FEC Complaint (the "Complaint") filed by the Bill Bradbury for U.S. Senate Campaign (the "Complainant") against his political opponent U.S. Senator Gordon Smith; the Senator's wife, Sharon Smith; and the Gordon Smith for US Senate Committee, Inc. (96) (the "Committee") (collectively the "Respondents"). The Commission granted the Respondents an extension of time to file this answer until December 23, 2002.

The Complaint alleges two violations: (1) Sharon Smith made, and the Committee accepted, an excessive contribution totaling nearly \$500,000, and (2) the Committee improperly reported the source of a loan to the campaign as coming from "personal funds."

The facts of this case are straightforward and prove that the allegations contained in the Complaint are without merit, and do not warrant the opening of an investigation by the FEC.

Background and Facts

In 1996, Gordon Smith ran for the United States Senate twice; first, unsuccessfully in a special election, and second, successfully in a general election to fill an open seat. During the course of those two campaigns, the candidate loaned his two committees a total of approximately 2.3 million dollars. Each of his committees received its own loan or loans during the respective campaigns. Financial institutions lent the candidate the funds used for these loans secured with the candidate's share of his real and personal property. These loans are not at issue in this case.

Since that time, and over the course of the last several years, the Senator has personally repaid the bank loans in full. The only remaining debt is owed by the two campaign committees to the Senator himself. These repayments, and the outstanding balance owed to the Senator, are not at issue in this case.

WASHINGTON, DC

NEW YORK



One of the loans the candidate made to his campaign in 1996 was for approximately 1.6 million dollars. The Senator has since made periodic principle and interest payments on the loan to the lender, U.S. Bank. As a result of these payments, on May 4, 2000, the balance owed to U.S. Bank was only \$589,321.23. See Attachment A. All of the payments the Senator made between 1996 and 2000 to reduce the debt are not at issue in this case.

The Committee's FEC Reports failed to reflect the periodic payments the Senator made to reduce the debt. This omission came to light when the Reports Analysis Division ("RAD") questioned the Committee's Treasurer about the lack of activity on this loan. RAD and the Committee's Assistant Treasurer spotted the mistake and agreed on a series of amendments to correct the record. This reporting error and the amendments made by the Committee are not at issue in this case.²

On April 26, 2000, the Senator and his wife refinanced their home in Maryland. Like many people in the Washington, D.C. area, the Smiths took equity out of their home at a time of low interest rates and markedly appreciating value. The Smith's home was valued between 2.01 million dollars and 2.3 million dollars at the time of the refinancing. See Attachment B. The Smiths secured a new homeowner's loan from Portland Mortgage for \$1.7 million dollars. The terms of that loan are not at issue in this case.

What is at issue in this case is (1) how much of the Smith's 2000 homeowner's loan was used to pay off the remaining campaign debt, and (2) how the Committee reported that repayment.

At the time of the refinancing, the remaining balance on the 1.6 million dollar 1996 campaign loan was only \$589,321.23. But due to the reporting error noted above, the public record still showed the remaining balance to be 1.6 million dollars. To correct that reporting error -- and to report the pay-off that had occurred -- RAD and the Committee's Assistant Treasurer devised an amendment, attached as Exhibit C, to reflect that all of the 1.6 million dollar loan was repaid as of May 2, 2000.³ In the aggregate, that was true: but the full 1.6 million dollars was not repaid on that date, the full amount had been repaid as of that date through years of the Senator's personal payments with only the final payment of \$589,321.23 occurring after the refinancing of the Smith's home.⁴

¹ Though the account was opened in December 1995, the transaction in question occurred in 1996.

² In an attempt to manufacture evidence of wrongdoing, the Complainant devotes a majority of the Complaint to repeated highlighting of the fact that the Committee has previously amended its filings in connection with an inquiry by RAD. The Committee made those amendments in full cooperation with the Commission and were the result of an agreement to close the matter with RAD. In our opinion, the Complainant's repeated reliance on this closed matter proves this exercise is simply an inappropriate attempt to politically attack the Senator.

³ See Exhibit D, Affidavit of Lisa Lisker.

⁴ Although the Committee's FEC reports do not show the evolving payments made by the Senator, his regularly filed Senate Financial Disclosure Reports do reflect the loan's lower balances between 1996 and 2000. Those reports, attached as Exhibit E, reflect a balance of between 1 million and 5 million dollars in between 1996 and 1998. Appropriately, the 1999 report lists the loan between \$500,000 and 1 million dollars, and the 2000 report does not list



The confluence of these events made it appear that the Senator and his wife used 1.6 million dollars, of a 1.7 million dollar refinancing, of a 2.3 million dollar home, to extinguish the campaign debt. That is not how it happened, only \$589,321.23 of the loan was used. But the way that the Committee and RAD agreed to report the transactions made it appear that 1.6 million dollars was used, causing the Complainant to mistakenly accuse Mrs. Smith (who co-signed the note) of making an illegal \$500,000⁵ contribution to her husband's campaign. Based on the facts outlined above, the Complainant is obviously mistaken and the allegations in the Complaint are without merit.

Senator Smith paid the U.S. Bank Loan in Full

Not only did Mrs. Smith not make an illegal \$500,000 contribution to the Committee, as the Complainant alleges, she did not make a contribution at all. The plain language of 11 C.F.R. § 110.10(b)(3) states:

A candidate may use a portion of assets jointly owned with his or her spouse as personal funds. The portion of the jointly owned assets that shall be considered as personal funds of the candidate shall be that portion which is the candidate's share under the instrument(s) of conveyance or ownership.

Further, 11 C.F.R. § 100.7(a)(1)(i)(D), states, "[t]he spouse shall not be considered a contributor to the candidate's campaign if the value of the candidate's share of the property used as collateral equals or exceeds the amount of the loan which is used for the candidate's campaign." The Complainant cites and relies upon this provision as a basis of the Complaint.

The Smith's Maryland home is jointly owned and valued at between 2.01 and 2.3 million dollars. See Attachment B. Therefore, under the terms of either 11 C.F.R. § 110.10(b)(3) or 11 C.F.R. § 100.7(a)(1)(i)(D), Senator Smith may contribute anywhere from 1.05 to 1.15 million dollars to his campaign from the proceeds of the home refinancing without involving his wife. See also, FEC Campaign Guide for Congressional Candidates and Committees 7/02, p. 19, 23; FEC Advisory Opinion 1991-10. Although the Smith's home loan was for 1.7 million dollars, Senator Smith only used \$589,321.23 to retire the U.S. Bank loan. Since \$589,321.23 is significantly less than the 1.05 million dollars the Senator could have used, it follows that the entire amount is attributable to him from his half of the value of the house.

Accordingly, the Commission can close this matter because: 1) the entire U.S. Bank loan was paid by funds attributable to Senator Smith; 2) the last lump sum payment of \$589,321.23 on May 5, 2000 is not attributable to Mrs. Smith because it is less than Senator Smith's half

it at all. These publicly filed reports corroborate the fact that the Senator had been making payments on the loan since 1996 and that the value of the loan was at least lower than 1 million dollars at the time of pay-off in 2000.

5 Although not clear, we assume that the Complainant derives this number from crediting Senator Smith with a 1.1 million dollar half interest in the home, leaving \$500,000 remaining on the 1.6 million dollar loan attributable to Mrs. Smith.



ownership in the value of their home; 3) the Complainant's allegation that Mrs. Smith made a illegal \$500,000 contribution is not factually or legally true; and 4) under the regulations of the Commission, Mrs. Smith didn't make a contribution at all. In light of these facts, it is unnecessary for the FEC to open an investigation into these allegations.

The Committee Properly Reported the Source of the Funds

The Complaint next alleged that the campaign misreported the funds used to pay off the remaining debt as "personal funds" instead of money secured by the refinancing mortgage. As outlined above, the funds in question came from a 1.7 million dollar refinancing of the Smith family home. Of that amount, the Senator ultimately used less than a third to personally pay off the U.S. Bank debt. The remaining 1.1 million dollars, the vast majority of the loan, was used to pay off other debts, purchase personal property and to infuse capital in the family business: Smith Frozen Foods.

Commission regulations require a committee to report a loan received "in connection with his or her campaign" as a loan. 11 C.F.R. § 102.7(d). The Senator did not receive the funds in question "in connection with" his campaign. The home refinancing occurred to take advantage of low interest rates and the equity in the home. The vast majority, over two thirds, of the proceeds from the loan were used for personal and business purposes by the Senator and his wife. Only a portion of the loan proceeds were eventually used to pay the 1996 campaign debt. The campaign owes this debt to the Senator, and not to Portland Mortgage. The Senator is not obligated to pay Portland Mortgage with any proceeds he may receive from the campaign. Finally, the Senator can waive the campaign's payment of this loan and forgive the amount (something the bank probably wouldn't do).

Therefore, the Senator did not obtain these funds "in connection with the campaign" and thus, they did not need to be designated as such in the Committee reports. The Committee reported this loan, of course, in good faith and without the intent to deceive.

If the Commission feels that the origin of these funds are more properly designated as a loan from Portland Mortgage, the Committee is willing to accept the Commission's advice on this matter and make this administrative amendment. Attached under tab F are papers suitable to amend the Committee's previous filing denoting that the personal funds were derived from a loan. If the Commission so directs and deems it necessary to do so, the Committee will formalize and file this amendment as a resolution to this matter.

⁶ The Oregonian article quoted in the Complaint is immaterial because the only quote from the Senator is "I'm still paying." The rest of the passage cited by the Complainant is characterization written by the reporter using the reporter's words.



The Complaint is Politically Motivated

ymngle

Finally, the Commission should note that the Senator's political opponent filed the Complaint in the final weeks of the campaign as it was becoming apparent that the race was over. The allegations did not create the desired press coverage the Complainant obviously sought because the Committee's attorney explained to the press that the violations, in fact, did not occur. The Commission is well aware of the legal value and seriousness of these sorts of complaints.

In light of the foregoing, we urge the Commission to take no action and close the file.

Sincerely,

Craig Engle

Attachments

ATTACHMENT A

DATE 61/09/01 PAGE 3320

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POSTBD	09-01-99	09-02-99	10-01	10-01-39	10-22-99	11-01-99	11-01-99	02-01-00	12-06-99	86-90-21	00-03-00	01-03-00	90-1E-10	01-31-60	03-22-00	62-25-00	93-63-00	03-62-60	03-07-00	05-17-00	09-03-00	00-10-70	00-10-50	05-01-00	02-02-00	00-50-50	05-08-00	
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ATTACHMENT B

Click here for a plain text ADA compliant screen.



Maryland Department of Assessments and Taxation MONTGOMERY COUNTY Real Property Data Search

Go Back View Map **New Search**

Account Identifier:

District - 10 Account Number - 02909067

Owner Information

Owner Name:

SMITH, GORDON H & S L

RESIDENTIAL

Principal Residence:

YES

Mailing Address:

8611 COUNTRY CLUB DR BETHESDA MD 20817-4579 **Deed Reference:**

1) /18053/ 372

2)

Location & Structure Information

Premises Address 8611 COUNTRY CLUB DR

Zoning RE2

Legal Description PERSIMMON TREE

BETHESDA 20817-4579

Parcel **Sub District**

Primary Structure Built

1996

Subdivision Section

Block Lot Α 18

Group Plat No: 81 Plat Ref: 18150

Special Tax Areas

Grid

Map

FN62

Town **Ad Valorem**

Tax Class

Enclosed Area

Property Land Area 2.06 AC

County Use 111

Stories 2

6,527 SF **Basement**

Type STANDARD UNIT Exterior **BRICK**

Value Information

Base Value

YES

Value As Of 01/01/2002

Phase-in Assessments As Of

07/01/2002

As Of 07/01/2003

Land: **Improvements:** Total:

Preferential Land:

551,800 1,405,970 1,957,770

Class

000

000

000

551,800 1,749,510 2,301,310

2,072,283

2,186,796

Transfer Information

Seller: SMITH, GORDON H TRUSTEE **NOT ARMS-LENGTH** Type: Seller: MONROE DEV CORP IMPROVED ARMS-LENGTH Type:

Date: 05/03/2000 /18053/ 372 Deed1:

Price: Deed2: Price: \$2,010,000

Deed2:

Date: 05/29/1997 Deed1: /14900/ 389 Date: 03/14/1991

Deed2: Price:

Seller: **NOT ARMS-LENGTH** Type:

Partial Exempt Assessments

Exemption Information

07/01/2002 07/01/2003 0 0 0 0 0 0

Deed1:

Tax Exempt: **Exempt Class:**

County

Municipal

State

NO

Special Tax Recapture:

* NONE *

ATTACHMENT C

26044131685

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

i.

FORM 3		uthorized Committee	1.0	Office Use Only						
NAME OF COMMITTEE (in	USE FEC MAIL! of full) OR TYPE OR P		if typing, type lines		Casality for vaccing					
GORDON SMITH	FOR US SENATE COM	AMITTEE INC (96)								
ADDRESS (number	and street) 228 S WAS	HINGTON STREET, SU	NTE 200							
Check if did than previo reported. (A	usiv	 		<u> VA </u>	22314					
2. FEC IDENTIFIC	ATION NUMBER	CITY 🛦		STATE A	ZIP CODE A STATE TOISTRICT					
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	of false, erroneous, or incom	plete information may subje	ect the person signin	ng this Report to the p	penalties of 2 U.S.C 437g					
Office Use Only					FEC FORM 3 (Revised 1/2001)					



SUMMARY PAGE

of Receipts and Disbursements

Page 2

Write or Type Committee Name

FEC Form 3 (Revised 1/2001)

GORDON SMITH FOR U S SENATE COMMITTEE INC (96)

Report Covering the Period

From

M N

D D |

2000

То

M M (

30

7 Y Y Y Y 2000

		COLUMN A This Period	COLUMN B Election Cycle-to-Date
6	Net Contributions (other than loans)		
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	(b) Total Contribution Refunds (from Line 20(d))	0.00 ***	\$ 92563.50 cc
	(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	, a tation of the composition o	
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	(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	29453.23 \(Constitution of the constit	**************************************
8	Cash on Hand at Close of Reporting Period (from Line 27)	2	-
9	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	. ************************************	
10	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	2293119.73	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

(Dividends, Interest, etc.) . TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)

(Carry Total to Line 24, page 4)

DETAILED SUMMARY PAGE

of Receipts

Page 3 FEC Form 3 (Revised 1/2001) Write or Type Committee Name GORDON SMITH FOR U S SENATE COMMITTEE INC (96) 30. 0 1 0 1 2000 To 0.6 2000 Report Covering the Period From. **COLUMN A COLUMN B** I. RECEIPTS **Total This Period Election Cycle-to-Date** 11 CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other Than **Political Committees** 0.00 (i) Itemized (use Schedule A) 0.00 (II) Unitemized... .. (iii) TOTAL of contributions 0.00 3284436.52 from individuals 23861.00 0.00 (b) Political Party Committees. Other Political Committees 876573.51 0.00 (such as PACS) 96400.00 0.00 (d) The Candidate (e) TOTAL CONTRIBUTIONS (other than loans) 0.00 4281271.03 (add Lines 11(a)(iii), (b), (c), and (d)) TRANSFERS FROM OTHER 0.00 133196.00 **AUTHORIZED COMMITTEES** 13 LOANS (a) Made or Guaranteed by the 1663881.05 4454569.15 Candidate 0.00 0.00 (b) All Other Loans.. ***** en er versenssen. De enrommen (c) TOTAL LOANS 1663881.05 4454569.15 (add Lines 13(a) and (b)) OFFSETS TO OPERATING 14 **EXPENDITURES** 0.00 18336.86 (Refunds, Rebates, etc.). OTHER RECEIPTS

0.00

1663881.05

116.12

8887489.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 1/2001) Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17	OPERATING EXPENDITURES	29453.23	4254232.79
18	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	$0.00\ \ ,$	367632.33
19	LOAN REPAYMENTS:		
	(a) Of Loans Made or Guaranteed by the Candidate.	1634427.82	2161449.42
	(b) Of all Other Loans	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	1634427.82 -	2161449.42
20	REFUNDS OF CONTRIBUTIONS TO		
	(a) Individuals/Persons Other Than Political Committees		86563.50
	(b) Political Party Committees	constraint of the constraint o	O.OO
	(c) Other Political Committees (such as PACs)		6000.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).	and the second section of the sectio	**************************************
21	OTHER DISBURSEMENTS		\$\$\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	5 4 00 1600 70 10 10 10 10 10 10 10 10 10 10 10 10 10	. 64 25/11/2 1 20000000 June 1620/11/2/2 164 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
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24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page3)	1663881.05
25	SUBTOTAL (add Line 23 and Line 24) .		178870. 00 The decision () 8 (A 20 00 Max. A programmed a 1 a ret desired 2 3700 1664040.75
26	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	1663881.05
27	CASH ON HAND AT CLOSE OF REPORTING (subtract Line 26 from Line 25)		159.70
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OR LINE NUMBER					PAGE 5/79						
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SCHEDULE A		Use separate schedule(s)	(check only one)				
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NAME OF COMMITTEE (In Full) GORDON SMITH FOR U S SENATE							
Full Name (Last, First, Middle Initial) A. Gordon H Smith			Date of Receipt				
Mailing Address 1101 Skyline Drive			01 03 2000				
City	State	Zıp Code					
Pendleton	OR	97801	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee	in angement	magaman ya san ya mayamay masa sa	6779.14				
Name of Employer U S Senate	Occupation Senator	on	Loan from Personal Funds				
Receipt For 1996 Primary X General Other (specify) ▼	, ment's resultant	Cycle-to-Date ▼ 636017.82	Transaction ID: SA13A.4177				
Full Name (Last, First, Middle Initial)							
3. Gordon H Smith			Date of Receipt				
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Full Name (Last, First, Middle Initial) C. Gordon H Smith	1		Date of Receipt				
Mailing Address 1101 Skyline Drive			03 202 2000				
City	State	Zıp Code					
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SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number only) and a manager control and the second companies from

FEC Schedule A

(Revised 1/2001)

SCHEDULE A

	FOR LINE NUMBER:	PAGE 6/79						
Use separate schedule(s) or each category of the Detailed Summary Page	(check only one)	11c 11d						
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not be sold or used by any political committe	erson for the purpose of sole to solicit contributions fro	liciting contributions m such committee						

ITEMIZED RECEIPTS		or each cate Detailed Su	egory of the immary Page		11a 12	\vdash	11b 13a	11c 13b		11d 14	15	
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NAME OF COMMITTEE (In Full) GORDON SMITH FOR US SENATE CO	OMMITTE	E INC (96)		,								
Full Name (Last, First, Middle Initial) A. Gordon H Smith		_ 			Date of	f Rec	- teint					
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Full Name (Last, First, Middle Initial) C. Gordon H Smith				 	Date o			_,,,,,,,,	., +1	- ·		
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Use separate schedule(s) or each category of the Detailed Summary Page

F	FOR LINE NUMBER.					PAGE 7/79						
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contribut	tions
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such commit	tee

NAME OF COMMITTEE (In Full)

Full Name (Last, First, Middle Initial) Gordon H Smith		Date of Receipt				
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City	State Zip Code					
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FEC Schedule A

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FEC Schedule B

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SCHEDULE B

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or for commercial purposes, other than using the name	and address of any political committee	e to solicit contributions from such committee			
NAME OF COMMITTEE (In Full)					
GORDON SMITH FOR US SENATE COMM	MITTEE INC (96)				
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or	for commercial purpo	ses, other than us	ing the name and a	dress of any polit	ical committe	e to solici	contribut	ions	from su	ich co	mmit	tee
	NAME OF COMMIT	TEE (In Full)										
$ \rangle$	GORDON SMITH	FOR US SEN	ATE COMMITTE	E INC (96)								
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	Full Name (Last, Fir	st, Middle Initial)				_						
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Use separate schedule(s) for each category of the Detailed Summary Page

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ME OF COMMITTEE (In Full) RDON SMITH FOR U.S. SENATE COMMITT	ΓEE INC (96)	
LOAN SOURCE Full Name (Last, First, M Gordon H Smith, - Personal funds	liddle Initial)	Election. Primary X General
Mailing Address 1101 Skyline Drive		Other (specify) ▼
City Pendleton	State OR ZIP	Code 97801
Original Amount of Loan	Cumulative Paymen	nt To Date Balance Outstanding at Close of This Perio
24100.00		0.00 24100 00
TERMS Date Incurred	Date D	Due Interest Rate Secured
10 03 1996	12/31/02	0 × (apr) Yes \ N
***************************************		Transaction ID: SC/10.4133
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding.
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount ************************************
City State	ZIP Code	Guaranteed Outstanding
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LOAN SOURCE Full Name	e (Last, First, Midd	le Initial)		Election
Gordon H Smith, - Personal funds				Primary X General
Mailing Address				Other (specify)
1101 Skyline Drive			0-1004	
City Pendleton			Code 97801	Ince Outstanding at Close of This Pe
Onginal Amount of Loan	200000 00	Cumulative Paymer	000	200000 00
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Date Incurre	<u> </u>	Date (12/31/02	oue interest Ha	0 ° % (apr) Yes
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Full Name (Last, First, M	fiddle Initial)		Name of Employer	Transaction ID: SC/10.4134
Mailing Address			Occupation	
City	State	ZIP Code	Guaranteed	
Full Name (Last, First, N	fiddle Initial)	 	Name of Employer	
Mailing Address		. ,	Occupation	
City	State	ZIP Code	Guaranteed	ameros our modules of the second person section of the second
Full Name (Last, First, N	fiddle Initial)		Name of Employer	
Mailing Address	· · · · · · · · · · · · · · · · · · ·		Occupation	
City	State	ZIP Code	Guaranteed	
Full Name (Last, First, N	Middle Initial)		Name of Employer	
Mailing Address		·	Occupation	
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City	State	ZIP Code	Guaranteed Outstanding	นา จัดเพลายนาม เมื่อ หาวด ออกเหลายนามเรื่องเขา เมษา หลังเพลา
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FEC Schedule C

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OAN SOURCE Full Name (Last, First, Middle Initial) Gordon H Smith, - Personal funds	Election Primary X General
Mailing Address	Other (specify)
1101 Skyline Drive City Pendleton State OR	ZIP Code 97801
Original Amount of Loan Cumulative Pay	
24100 00	0.00 24100.00
	ate Due Interest Rate Secured
11 05 1996 12/31/02	0 % (apr) Yes []
	Transaction ID: SC/10.4137
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount sever any management of the second several second several second several second
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount inacque is quesque esque esque que que que que esque
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding
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LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Election:
Gordon H Smith, - Personal funds		Primary
Mailing Address		X General Other (specify) ▼
1101 Skyline Drive		
City Pendleton Original Amount of Loan	State OR ZIP Cumulative Paymer	Code 97801 at To Date Balance Outstanding at Close of This Perior
24100 00	man immeriment metasses vand	
TERMS		Discount Date Construct
Date Incurred WYW 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Date [12/31/02	
constant manager transformation		A (abr)
Full Name (Last, First, Middle Initial)		Transaction ID: SC/10.4138 Name of Employer
Mailing Address		Occupation
O.t.	e ZIP Code	Amount Guaranteed
City State	e zir Code	Outstanding:
Full Name (Last, First, Middle Initial)	** * *	Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	e ZIP Code	Amount Guaranteed Outstanding
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LOAN SOURCE Full N	•	ddie Initial)	Election
Gordon H Smith, - Pers	onal funds		X General
Mailing Address			Other (specify) ▼
1101 Skyline Drive City Pendleton		State OR ZIF	P Code 97801
Original Amount of Lo	an	Cumulative Payme	nt To Date Balance Outstanding at Close of This
	24100.00	; ;	0 00 24100.0
TERMS Date Inc	curred	Date	Due Interest Rate Secured
M W B B B 12 26	1996	12/31/02	0 % (apr) Yes [
			Transaction ID: SC/10.4139
Full Name (Last, Fire	st, Middle Initial)		Name of Employer
Mailing Address		····	Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, Fire	st, Middle Initial)		Name of Employer
Mailing Address			Occupation
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City	State	ZIP Code	Guaranteed ' Outstanding A MAR HAR HAR HAR HAR HAR HAR HAR HAR HAR H
Full Name (Last, Fir	st, Middle Initial)		Name of Employer
Mailing Address	· · · · · · · · · · · · · · · · · · ·		Occupation
City	State	ZIP Code	Amount Guaranteed ?
Full Name (Last, Fir	et Middle Initial)		Outstanding Name of Employer
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Mailing Address		a	Occupation
			Amount "
City	State	ZIP Code	Guaranteed Outstanding
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OAN SOURCE Full Name (Last, First, Middle Gordon H Smith, - Personal funds	Initial)	Election: Primary X General
Mailing Address		Other (specify) ▼
1101 Skyline Drive City Pendleton Si	tate OR ZIP C	Code 97801
	Cumulative Payment	To Date Balance Outstanding at Close of This P
11139 90	anne a mariament anno anno anno anno anno anno anno an	0 00 11139 90
ERMS Date Incurred	Date Du	ue Interest Rate Secured
, 02 '03 \ 1997 \ 12	2/31/02	0 % (apr)
		Transaction ID: SC/10.4140
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding.
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding.
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address	· · · · · · · · · · · · · · · · · · ·	Occupation
City State	ZIP Code	Amount Guaranteed
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LOAN SOURCE Full !	Name (Last, First, Mide	de Initial)	Election
Gordon H Smith, - Pers	sonal funds		Primary X General
Mailing Address	·		☐ Other (specify) ▼
1101 Skyline Drive City Pendleton		State OR ZI	Code 97801
Original Amount of Lo	ean	Cumulative Payme	
to mark mentangananganangan	9879 57	s newsparsenparsenparsenparsen s	0.00 9879 57
TERMS Date Inc		Date	Due Interest Rate Secured
03 02	1997	12/31/02	0 % (apr) Yes No
			Transaction ID: SC/10.4141
Full Name (Last, Fir	rst, Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, Fir	st, Middle Initial)		Name of Employer
Mailing Address			Occupation
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City	State	ZIP Code	Guaranteed , Outstanding :: ""
Full Name (Last, Fir	st, Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, Fir	st, Middle Initial)		Name of Employer
Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding
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NAME OF COMMITTEE (In Full) GORDON SMITH FOR U S SENATE COMMITT	EE INC (96)		
LOAN SOURCE Full Name (Last, First, Min Gordon H Smith, - Personal funds	ddle Initial)		Election: Primary X General
Mailing Address 1101 Skyline Drive			Other (specify)
City Pendleton	State OR ZIP Co	de 97801	
Original Amount of Loan	Cumulative Payment To		ce Outstanding at Close of This Period
11134.97	Samuel many company and company	0.00	11134.97
TERMS Date Incurred	Date Due	Interest Rate	Secured
04 03 1997	12/31/02		0 % (apr) Yes No
		Т	ransaction ID: SC/10.4142
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Guaranteed	grand of a state and the state of the state
Full Name (Last, First, Middle Initial)		Name of Employer	
`Mailing Address		Occupation	
City State	ZIP.Code	Guaranteed	grant signer an jamaner and any amine, is a sur subsiste separature,
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount	grandormanimogranico en antenergianister antenergianister y efente o efente en .
City	ZIF Code		a se de la company de la compa
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address	······································	Occupation	
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City State	ZIP Code	Guaranteed Outstanding	in a saaraa aa a
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FOR LINE NUMBER (check only one)

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LOAN SOURCE Full I	•	lle initial)	Election.	_
Gordon H. Smith, - Pers	sonal funds		Primary X General	
Mailing Address			Other (specify) ▼	
1101 Skyline Drive City Pendleton		State OR ZIF	P Code 97801	
Original Amount of Lo		Cumulative Payme		Perio
magarangananganan panarpanan sasirrani orontarral sos adamos	11109.26	processing some processing som	000 (11109.	
TERMS Date Inc		Date	Due Interest Rate Secured	
05 06		12/31/02	0 % (apr) Yes	N
			Transaction ID: SC/10.414	3
Full Name (Last, Fir	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding	
Full Name (Last, Fir	st, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount """ """ """ """ """ """ """ """ """ "	
Full Name (Last, Fir	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding	
Full Name (Last, Fir	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding	
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Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER (check only one)

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	MITTEE INC (96)	
LOAN SOURCE Full Name (Last, Fire Gordon H. Smith, - Personal funds	st, Middle Initial)	Election. Primary X General
Mailing Address 1101 Skyline Drive		Other (specify) ▼
City Pendleton	State OR ZIP	Code 97801
Original Amount of Loan	Cumulative Payme	nt To Date Balance Outstanding at Close of This Period
11362	84	0 00 11362.84
TERMS Date Incurred	Date 1	
05 31 1997	12/31/02	O % (apr) Yes No
		Transaction ID: SC/10.4144
Full Name (Last, First, Middle Initia	d)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding.
Full Name (Last, First, Middle Initia	ıl)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initia	ıl)	Name of Employer
Mailing Address		Occupation
City	State ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initia	ıl)	Name of Employer
Mailing Address	Ċ.	Occupation
City	State ZIP Code	Amount Guaranteed
		Outstanding :
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FEC Schedule C

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NAME OF COMMITTEE (In Full) GORDON SMITH FOR U S SENATE COMMITTEE INC (96)	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election Primary
Gordon H Smith, - Personal funds	X General
Mailing Address	☐ Other (specify) ▼
1101 Skyline Drive City Pendleton State OF	ZIP Code 97801
	ve Payment To Date Balance Outstanding at Close of This Period
10925.97	0.00 10925 97
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	Transaction ID: SC/10.4145
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
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Only State 211 See	Outstanding.
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
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Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
Maining Address	Occupation
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City State ZIP Co	de Guaranteed Outstanding ************************************
Full Name (Last, First, Middle Initial)	Name of Employer
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Mailing Address	Occupation
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City State ZIP Co	de Guaranteed Outstanding
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FOR LINE NUMBER (check only one)

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13b

OAN SOURCE Full Name (Last, First	, Middle Initial)	Election Primary
Gordon H. Smith, - Personal funds	X General	
Mailing Address 1101 Skyline Drive		Other (specify) ▼
City Pendleton	State OR ZIF	Code 97801
Original Amount of Loan	Cumulative Payme	ent To Date Balance Outstanding at Close of This Pe
11220 5	8	0.00 11220.58
ERMS Date Incurred	Date	Due Interest Rate Secured
07 31 1997	3 12/31/02 3 12/31/02	0 % (apr) Yes
		Transaction ID: SC/10.4146
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City Sta	ate ZIP Code	Guaranteed) Outstanding:
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount janger of magning marines grown on a const
City	ate ZIP Code	Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount > > ~ , we are very management a second a comment of the co
City St.	ate ZIP Code	Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City St	ate ZIP Code	Guaranteed Outstanding
		violatuja a.i. 58m 24m 88 c.i. a.i.m. 18 a.i.m. maana ina nagnahaa
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(Revised 1/2001)

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FOR LINE NUMBER (check only one)

X 13a 13b

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LOAN SOURCE Full Name (Last, First, Mic Gordon H Smith, - Personal funds	idie Initial)	Election Primary X General
Mailing Address		Other (specify)
1101 Skyline Drive City Pendleton	State OR ZIF	Code 97801
Onginal Amount of Loan	Cumulative Payme	nt To Date Balance Outstanding at Close of This Perio
1116114	· · · · · · · · · · · · · · · · · · ·	0.00 11161.14
TERMS Date Incurred	Date	Due Interest Rate Secured.
M M B B B Y Y Y V V 0 0 0 1 1 9 9 7	12/31/02	0 % (apr) Yes ☐ N
		Transaction ID: SC/10.4147
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)	· , · · · · · · · · · · · · · · · · · ·	Name of Employer
Mailing Address		Occupation
Crty State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding
BTOTALS This Period This Page (optional)		

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	13b
NAME OF COMMITTEE (In Full)	
GORDON SMITH FOR U S SENATE COMMITTEE INC (96)	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election
Gordon H. Smith, - Personal funds	Primary X General
Mailing Address 1101 Skyline Drive	Other (specify)
	IP Code 97801
Original Amount of Loan Cumulative Paym	nent To Date Balance Outstanding at Close of This Period
10735.57	0.00
TERMS Date incurred	- Dura Interest Bate Secured
Date incurred Date	e Due Interest Rate Secured
09 29 (1997) 12/31/02	0 % (apr) Yes No
	Transaction ID: SC/10.4148
Full Name (Last, Fırst, Mıddle Inıtıal)	Name of Employer
Mailing Address	Occupation
	Amount
Crty State ZIP Code	Guaranteed Outstanding
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount . was frame for of montes misses for an indicate solver change.
City State ZIP Code	Guaranteed Outstanding
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
City State ZIP Code	Guaranteed Outstanding
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Carry outstanding balance only to LINE 3, Schedule D, for this line. If no	Schedule D. carry forward to appropriate line of Summary

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FOR LINE NUMBER (check only one)

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LOAN SOURCE Full	Name (Last, First, Midd	le Initial)	Election
Gordon H. Smith, - Personal funds			Primary
Marling Address			X General Other (specify) ▼
Mailing Address 1101 Skyline Drive			Cities (Specify)
City Pendleton		State OR ZIF	² Code 97801
Original Amount of Lo		Cumulative Payme	nt To Date Balance Outstanding at Close of This I
	10610.26		0.00 10610 2
TERMS Date In		Date	
M M D 0;		12/31/02	0 % (apr) Yes
			Transaction ID: SC/10.4149
Full Name (Last, Fi	rst, Middle Initial)		Name of Employer
Mailing Address			Occupation
City	State	ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, Fi	rst, Middle Initial)	······································	Name of Employer
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LOAN SOURCE Full Name (Last, First, Mid	Election Primary	
Gordon H Smith, - Personal funds		X General
Mailing Address	***************************************	Other (specify)
1101 Skyline Drive		
City Pendleton	State OR ZII	P Code 97801
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FEC Schedule C

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LOAN SOURCE Full Name (Last, First, Mic Gordon H Smith, - Personal funds	idle Initial)	Election Primary X General
Mailing Address 1101 Skyline Drive		Other (specify)
City Pendleton	State OR ZIF	P Code 97801
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City State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
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LOAN SOURCE Full Na	ame (Last, First, Midd	ie initial)	Election	
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NAME OF COMMITTEE (In Full)		
GORDON SMITH FOR U S SENATE COMMITTEE INC (96)		
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:	
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Gordon H Smith, - Personal funds	X General	
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	P Code 97801	
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(Revised 1/2001)

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FEC Schedule C

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City Pendleton			Code 97801
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LOAN SOURCE Full Name (Last, First, Mide Gordon H Smith, - Personal funds	die initial)	Election Primary	
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Mailing Address		Other (specify)	
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SCHEDULE C LOANS

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NAME OF COMMITTEE (In Full)				
ORDON SMITH FOR U S SENATE COMMIT				
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Gordon H. Smith, - Personal funds			Primary X General	
Mailing Address 1101 Skyline Drive			Other (specify)	
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NAME OF COMMITTEE (In Full)	
ORDON SMITH FOR U S SENATE COMMITTEE INC (96)	
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Gordon H Smith, - Personal funds	X General
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SCHEDULE C LOANS

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NAME OF COMMITTEE (In Full) GORDON SMITH FOR U S SENATE COMMITTE	'EE INC (96)	
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LOAN SOURCE Full Name (Last, First, Mid	ddle Initial)	Election.
Gordon H Smith, - Personal funds		Primary X General
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LOAN SOURCE Full Nam Gordon H Smith, - Persona	•	e Initial)	Election. Primary
Mailing Address			X General Other (specify) ▼
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City Pendleton			Code 97801
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Mailing Address			Occupation
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Gordon H Smith, - Personal funds	-	Primary	
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AME OF COMMITTEE (In Full)					
ORDON SMITH FOR U.S. SENATE COMMITTEE	INC (96)				
LOAN SOURCE Full Name (Last, First, Middle	e Initial)		Election		
Gordon H. Smith, - Personal funds			Primary		
			X General	. –	
Mailing Address			Other (specify	<i>1</i>) ▼	
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City State	ZII 0006	Guaranteed Outstanding:	ander when he was also		
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NAME OF COMMITTEE (In GORDON SMITH FOR U S	•	E INC (96)	
LOAN SOURCE Full	Name (Last, First, Midd	le Initial)	Election
Gordon H Smith, - Pers	sonal funds		Primary
Mailing Address	····		X General
Mailing Address 1101 Skyline Drive			Other (specify)
City Pendleton		State OR ZIF	Code 97801
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NAME OF COMMITTEE (IN Full) GORDON SMITH FOR U S SENATE COMMIT	TEE INC (96)		
LOAN SOURCE Full Name (Last, First, M Gordon H Smith, - Personal funds	liddle initial)		Election Primary X General
Mailing Address 1101 Skyline Drive			Other (specify)
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LOAN SOURCE Full Gordon H Smith, - Pers		le Initial)	Election Primary X General	
Mailing Address 1101 Skyline Drive			X General Other (specify) ▼	
City Pendleton		State OR ZII	Code 97801	
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Full Name (Last, Fi	rst, Middle Initial)		Name of Employer	
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Full Name (Last, Fi	rst, Middle Initial)		Name of Employer	
Mailing Address			Occupation	
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City	State	ZIP Code	Guaranteed Outstanding	
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FOR LINE NUMBER (check only one)

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LOAN SOURCE Full Name (Lost Errot Mide	lle Inite)	Election
Gordon H. Smith, - Personal fu		ne milal)	Primary X General
Mailing Address 1101 Skyline Drive			Other (specify)
City Pendleton		State OR ZIF	P Code 97801
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Full Name (Last, First, Mid	dle initial)		Name of Employer
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LOAN SOURCE Full Name	a /l ast Firet Mide	lle initial)	Election.	
Gordon H Smith, - Personal	•	ne muai)	Primary	
Gordon H. Simin, - Personal	iulius		X General	
Mailing Address			Other (specify) ▼	
1101 Skyline Drive		State OR ZIP	Code 97801	
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NAME OF COMMITTEE (In Full) GORDON SMITH FOR U S SENATE COMMITT	EE INC (96)	
LOAN SOURCE Full Name (Last, First, M Gordon H Smith, - Personal funds	iddle Initial)	Election Primary X General
Mailing Address 1101 Skyline Drive		Other (specify) ▼
City Pendleton	State OR ZIP Co	ode 97801
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Mailing Address		Occupation
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Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding
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NAME OF COMMITTEE (In Full) GORDON SMITH FOR U.S. SENATE COMMITTEE INC (96)	
CONDON CHAPTER COMMITTEE IN COOK	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election
Gordon H. Smith, - Personal funds	Primary
Mailing Address	X General Other (specify) ▼
1101 Skyline Drive	Other (specify)
City Pendleton State OR ZIP Co	ode 97801
Original Amount of Loan Cumulative Payment 7	To Date Balance Outstanding at Close of This Period
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Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
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Full Name (Last, First, Middle Initial)	Name of Employer
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NAME OF COMMITTEE (In Full) GORDON SMITH FOR U S SENATE COMMITTEE INC (96)	
LOAN SOURCE Full Name (Last, First, Middle Initial) Gordon H Smith, - Personal funds Mailing Address 1101 Skyline Drive	Election Primary X General Other (specify)
City Pendleton State OR ZIP Co	ode 97801
Original Amount of Loan Cumulative Payment 7120.95	_
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Mailing Address	Occupation
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Full Name (Last, First, Middle Initial)	Name of Employer
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City State ZIP Code	Guaranteed Outstanding
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FOR LINE NUMBER (check only one)

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LOAN SOURCE Full Name (Last, First, Middle Gordon H Smith, - Personal funds	Initial)	Election: Primary X General
Mailing Address 1101 Skyline Drive		Other (specify)
	ate OR ZIP C	Code 97801
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7237 07	unudi.masku nadamoni.m-nim	0.00 7237.07
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Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding:
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Mailing Address	· · · · · · · · · · · · · · · · · · ·	Occupation
\ }		Amount
City State	ZIP Code	Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Outstanding Name of Employer
Mailing Address		Occupation
		Amount ************************************
City State	ZIP Code	Guaranteed Outstanding
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LOAN SOURCE Full Na	me (Last, First, Midd	lie Initial)	Election:
Gordon H Smith, - Persor	nal funds	·	Primary
Mailing Address			X General Other (specify) ▼
1101 Skyline Drive			
City Pendleton		······································	Code 97801
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			Transaction ID: SC/10.4176
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Mailing Address			Occupation
			Amount
City	State	ZIP Code	Guaranteed Outstanding
Full Name (Last, First	Middle Initial)		Name of Employer
Mailing Address	·	<u></u>	Occupation
			Amount
City	State	ZiP Code	Guaranteed Outstanding
Full Name (Last, First	Middle Initial)		Name of Employer
Mailing Address			Occupation
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City	State	ZIP Code	Guaranteed Outstanding
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LOAN SOURCE Full Name (Last, First, Middle Initial)	Election Primary
Gordon H Smith, - Personal funds	X General
Mailing Address	Other (specify) ▼
1101 Skyline Drive	
	ZIP Code 97801
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	ate Due Interest Rate Secured
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X 13a

AME OF COMMITTEE (In Full)	
ORDON SMITH FOR U S SENATE COMMITTEE INC (96)	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election ·
Gordon H Smith, - Personal funds	Pnmary
GOLDON TO CHIRTH - 1 GISONICI IN INC.	X General
Mailing Address	Other (specify) ▼
1101 Skyline Drive	
	IP Code 97801
Onginal Amount of Loan Cumulative Paym	nent To Date Balance Outstanding at Close of This Period
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	e Due Interest Rate Secured:
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01 31 - 2000 , 12/31/02	0 % (apr) Yes No
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Mailing Address	Occupation
	Amount
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(Revised 1/2001)

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LOAN SOURCE Full Name (Last, First, Middle Initial)	Election
Gordon H. Smith, - Personal funds	Primary Primary
As the Address Address A	X General
Mailing Address 1101 Skyline Drive	Other (specify) ▼
City Pendleton State OR	ZIP Code 97801
Original Amount of Loan Cumulative Pa	ayment To Date Balance Outstanding at Close of This Pe
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	Amount
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Mailing Address	Occupation
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AME OF COMMITTEE (In Full)		
ORDON SMITH FOR U S SENATE COMMITTEE INC (96)		
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election.	
Gordon H. Smith, - Personal funds		
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Full Name (Last, First, Middle Initial)	Transaction ID: SC/10.4180 Name of Employer	
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Mailing Address	Occupation	
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Full Name (Last, First, Middle Initial)	Name of Employer	
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PAGE 60 / 79

LOAN SOURCE Full Na	ame (Last, First, Midd	le Initial)		Election
Gordon H. Smith, - Perso	nal funds			Primary
Mailing Address				X General Other (specify) ▼
1101 Skyline Drive				
City Pendleton	<u></u>		Code 97801	
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LOANS

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RDON SMITH FOR U S SENATE COMMIT	TEE INC (96)		
LOAN SOURCE Full Name (Last, First, N	fiddle initial)	Election.	
Gordon H Smith, - Personal funds		Primary X General	
Aailing Address		Other (specify)	
1101 Skyline Drive		Carlot (openity) V	
City Pendleton	State OR ZIF	Code 97801	
Original Amount of Loan	Cumulative Payme	nt To Date Balance Outstanding at Close of Thi	s Pen
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NAME OF COMMITTEE (In Full) GORDON SMITH FOR U S SENATE COMMITTE	E INC (96)	
GORDON SIMILE FOR U.S. SENATE COMMITTE	E 1140 (30)	
LOAN SOURCE Full Name (Last, First, Mid	die Initial)	Election
Gordon H. Smith, - Personal funds		Primary X General
Mailing Address		Other (specify)
1101 Skyline Drive		Onter (specify)
City Pendleton	State OR ZIP C	Code 97801
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LOAN SOURCE Full Name (Last, First, U.S National Bank of Oregon	Middle Initial)		Election X Primary	
Mailing Address			General Other (spec	ıfy) 🔻
555 SW Oak St				
City Portland		Code 97204		
Original Amount of Loan	Cumulative Paymer	nt To Date	Balance Outstanding a	t Close of This Peri
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			Transaction ID:	SC/10.4108
Full Name (Last, First, Middle Initial)		Name of Employer	Transaction ib.	00/10:4100
Gordon H. Smith		U S. Senate		
Mailing Address		Occupation	,	
1101 Skyline Drive		Senator		
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City Stat		Guaranteed	. and assert a second manufacture of	0 00
Pendleton OR	97801	Catalanang.		
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Mailing Address		Occupation		•
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LOAN SOURCE Full Name (Last, First, Middle Initial) U.S. National Bank of Oregon Mailing Address 555 SW Oak St City Portland State OR ZIP C	Election. X Primary General
Mailing Address 555 SW Oak St	General
555 SW Oak St	
	U Other (specify) ▼
	Code 97204
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TERMS Date Incurred Date Du	ue Interest Rate Secured:
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	Transaction ID: SC/10.4120
Full Name (Last, First, Middle Initial) Gordon H Smith	Name of Employer U S. Senate
Mailing Address 1101 Skyline Drive	Occupation Senator
City State ZIP Code Pendleton OR 97801	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Coutstanding
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding
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LOAN SOURCE Full Name (Last, First, M	ıddle initial)	Election:
U S. National Bank of Oregon	X Pnmary	
Mailing Address	General Other (specify) ▼	
Mailing Address 555 SW Oak St		Citier (specify)
City Portland	State OR ZIP	Code 97204
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Full Name (Last, First, Middle Initial) Gordon H. Smith		Name of Employer U S Senate
Mailing Address		Occupation
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City State Pendleton OR	ZIP Code 97801	Guaranteed 0.00 Cutstanding
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LOAN SOURCE Full Name (Las	t. First. Midd	die Initial)		Election
U S. National Bank of Oregon	.,	····,		X Primary General
Mailing Address			· · · · · · · · · · · · · · · · · · ·	Other (specify)
555 SW Oak St		State OR ZIF	Code 97204	
City Portland				Ince Outstanding at Close of This Period
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TERMS Date Incurred		Date	Due Interest Rat	te Secured.
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Gordon H Smith Mailing Address			U S. Senate Occupation	
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NAME OF COMMITTEE (In Full) GORDON SMITH FOR U S SENATE COMMITTE	EE INC (96)		
LOAN SOURCE Full Name (Last, First, Mill U.S National Bank of Oregon	ddle Initial)	Election. X Primary General	
Mailing Address 555 SW Oak St		Other (specify) ▼	
City Portland	State OR ZIP C	Code 97204	
Original Amount of Loan	Cumulative Payment	To Date Balance Outstanding at Close of This Period	
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		Transaction ID: SC/10.4112	
Full Name (Last, First, Middle Initial) Gordon H Smith		Name of Employer U S Senate	
Mailing Address 1101 Skyline Drive		Occupation Senator Amount	
City State Pendleton OR	ZIP Code 97801	Amount Guaranteed Outstanding.	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed Outstanding	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Guaranteed	
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NAME OF COMMITTEE (In Full)				
GORDON SMITH FOR U S SENATE COMMITTEE INC (96)				
LOAN SOURCE Full Name (Last, First, Middle Initial)				
U S. National Bank of Oregon				
Mailing Address	Other (specify) ▼			
Mailing Address ☐ Other (specify) ▼ 555 SW Oak St				
City Portland State OR ZIP C	ode 97204			
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1101 Oxymio Dilvo	Amount			
City State ZIP Code	Guaranteed 0.00			
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Full Name (Last, First, Middle Initial)	Name of Employer			
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AME OF COMMITTEE (In Full)				
ORDON SMITH FOR US SENATE COMM	AITTEE INC (96)			
LOAN SOURCE Full Name (Last, Firs	t, Middle Initial)		Election	
U.S National Bank of Oregon			X Primary General	
Mailing Address 555 SW Oak St			Other (spe	cify) 🔻
City Portland	State OR ZI	P Code 97204		
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Full Name (Last, First, Middle Initial)		Name of Employer	Transaction ID:	SC/10.4123
Gordon H Smith		U. S Senate		
Mailing Address		Occupation		
1101 Skyline Drive		Senator		
		Amount	manda arizma i v m famin ana	manufam atian restama
City St	ate ZIP Code	Guaranteed		0.00
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Full Name (Last, First, Middle Initial)	i	Name of Employer		
Mailing Address		Occupation		
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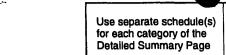
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LOAN SOURCE Full Name (Last, First, Mic U.S National Bank of Oregon	ddle Initial)	Election X Primary General	
Mailing Address 555 SW Oak St			
City Portland	State OR ZIP Co	de 97204	
Original Amount of Loan	Cumulative Payment To	Date Balance Outstanding at Close of This Period	
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		Transaction ID: SC/10.4124	
Full Name (Last, First, Middle Initial) Gordon H. Smith Mailing Address		Name of Employer U S Senate Occupation	
1101 Skyline Drive		Senator Amount	
City State Pendleton OR	ZIP Code 97801	Guaranteed (0.00) Outstanding:	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address	eron agent and the state of the	Occupation	
City State	ZIP Code	Amount paragraph programmer grown and a second and a seco	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City State	ZIP Code	Amount Jacob palanamage of the second palanama	
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address	n	Occupation	
		Amount ************************************	
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LOAN SOURCE Full Name (Last, First, Mi U S. National Bank of Oregon	ddle Initial)	Election: X Primary General
Mailing Address 555 SW Oak St		Other (specify)
City Portland	State OR ZIP	Code 97204
Original Amount of Loan	Cumulative Paymer	nt To Date Balance Outstanding at Close of This Pe
100000.00	; ; ;	100000.00
ERMS Date Incurred	Date I	Due Interest Rate Secured.
11 28 1995	2/28/02	8.090 % (apr) Yes
		Transaction ID: SC/10.4125
Full Name (Last, First, Middle Initial) Gordon H. Smith Mailing Address		Name of Employer U. S Senate Occupation
1101 Skyline Drive		Senator Amount
City State Pendleton OR	ZIP Code 97801	Guaranteed , 0.00 Outstanding to evidential above the second and t
Full Name (Last, First, Middle Initial)		Name of Employer
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Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City State	ZIP Code	Amount Guaranteed
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FEC Schedule C

(Revised 1/2001)

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DRDON SMITH FOR U S SENATE COM	WINIT EE 1140 (96)	
LOAN SOURCE Full Name (Last, F	ırst, Mıddle İnitial)	Election
U S National Bank of Oregon		X Primary
NA-three Address -		General Character T
Mailing Address 555 SW Oak St		Other (specify)
City Portland	State OR ZIF	Code 97204
Onginal Amount of Loan	Cumulative Payme	ont To Date Balance Outstanding at Close of This Period
15000	0.00 :	150000.00 0.00
TERMS Date Incurred	Date	Due Interest Rate Secured
12 05 1995	2/28/02	8.090 % (apr) Yes \(\text{ Yes} \)
		Transaction ID: SC/10.4126
Full Name (Last, First, Middle Initi	al)	Name of Employer
Gordon H. Smith		U S. Senate
Mailing Address		Occupation
1101 Skyline Drive		Senator Amount
City	State ZIP Code	Amount Guaranteed 0 000
	OR 97801	Outstanding:
Full Name (Last, First, Middle Initi	al)	Name of Employer
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FEC Schedule C

(Revised 1/2001)

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AME OF COMMITTEE ((in Fuli)		
ORDON SMITH FOR U	S SENATE COMMITTE	EE INC (96)	
LOAN SOURCE FU	II Name (Last, First, Mid	Idle Initial)	Election.
US National Bank of	Oregon		X Primary
			General
Mailing Address		•	Other (specify)
555 SW Oak St City Portland		State OR ZIF	P Code 97204
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i madamikan di masama	100000.00		10000 00
	Incurred	Date	
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,			Transaction ID: SC/10.4127
Full Name (Last,	First, Middle Initial)		Name of Employer
Gordon H Smith			U S. Senate
Mailing Address			Occupation
1101 Skyline Drive			Senator
			Amount
City Pendleton	State OR	ZIP Code 97801	Guaranteed 0000
	First, Middle Initial)		Name of Employer
Mailing Address			Occupation
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City	State	ZIP Code	Amount
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Mailing Address			Occupation
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LOAN SOURCE Full Name (Last, First, I) U.S. National Bank of Oregon	muule miliai)	X Primary
U.S. National Bank of Oregon		General General
Mailing Address		☐ Other (specify) ▼
555 SW Oak St. City Portland	State OR ZIF	P Code 97204
Onginal Amount of Loan	Cumulative Payme	ent To Date Balance Outstanding at Close of This Pe
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TERMS Date Incurred	Date	Due Interest Rate Secured.
M M D D 1995	2/28/02	8.090 % (apr) Yes
		Transaction ID: SC/10.4128
Full Name (Last, First, Middle Initial)		Name of Employer
Gordon H Smith Mailing Address		U S Senate Occupation
1101 Skyline Drive		Senator
1101 Oxymic Divo		Amount
City Stat Pendleton OR	e ZIP Code 97801	Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount 100 men wagen water with him you wagen a so we pain so the wayer
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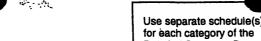
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PAGE 75/79

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LOAN SOURCE Full Name (Last, First,	Middle Initial)	***************************************	Election
U.S National Bank of Oregon	who are whitely		X Primary
		·	General
Mailing Address			Other (specify)
555 SW Oak St City Portland	State OR ZIF	² Code 97204	
Original Amount of Loan	Cumulative Payme		nce Outstanding at Close of This Period
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01 5 04 1996	2/28/02	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	8 090 % (apr) Yes No
			Transaction ID: SC/10.4129
Full Name (Last, First, Middle Initial)		Name of Employer	
Gordon H Smith	· · · · · · · · · · · · · · · · · · ·	U S Senate	
Mailing Address 1101 Skyline Drive		Occupation Senator	
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NAME OF COMMITTEE (In Full) GORDON SMITH FOR U S SENATE COMMITTEE INC (96)	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election
U.S National Bank of Oregon	X Primary General
Mailing Address	Other (specify) ▼
555 SW Oak St City Portland State OR	ZIP Code 97204
Original Amount of Loan Cumulative	Payment To Date Balance Outstanding at Close of This Period 200000 00 0 00
TERMS Date incurred	Date Due Interest Rate Secured
Date il conted	
01 09 1996 2/28/02	8.090 % (apr) Yes No
	Transaction ID: SC/10.4130
Full Name (Last, First, Middle Initial)	Name of Employer
Gordon H. Smith	U S Senate
Mailing Address	Occupation Senator
1101 Skyline Drive	Amount Amount
City State ZIP Code	Guaranteed 0.00
Pendleton OR 97801	Outstanding.
Full Name (Last, First, Middle Initial)	Name of Employer
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FEC Schedule C

(Revised 1/2001)

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER (check only one)

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X 13a 13b

NAME OF COMMITTEE (In Full)			
GORDON SMITH FOR US SENATE COMMIT	ITEE INC (96)		
LOAN SOURCE Full Name (Last, First, U.S. National Bank of Oregon	Middle Initial)		Election X Primary General
Mailing Address 555 SW Oak St			Other (specify)
City Portland	State OR ZIP Co	de 97204	
Original Amount of Loan	Cumulative Payment T	o Date Bala	nce Outstanding at Close of This Period
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08 26 1996	2/28/02		8.090 (apr) Yes No
		· · · · · · · · · · · · · · · · · · ·	Transaction ID: SC/10.4131
Full Name (Last, First, Middle Initial) Gordon H Smith		Name of Employer U S Senate	
Mailing Address 1101 Skyline Drive		Occupation Senator Amount	
City Stat Pendleton OR	e ZIP Code 97801	Guaranteed	0 00 ,
Full Name (Last, First, Middle Initial)		Name of Employer	
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City Stat	e ZIP Code	Guaranteed	internation recognished graduates are the statement of a con-
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City Stat	e ZIP Code	Guaranteed	and, and rate at describe communications of progress (1988) common to the species of the second common to the seco
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Mailing Address		Occupation	
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FEC Schedule C

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PAGE 78/79

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LOAN SOURCE Full Name (Last, First, Middle Initial) U-S. National Bank of Oregon Mailing Address 555 SW Oak St. City Portland State OR ZIP C Original Amount of Loan Cumulative Payment 45000.00	
555 SW Oak St. City Portland State OR ZIP CONGRIGHT CONTROL Cumulative Payment 45000.00	Other (specify) ▼ Code 97204 To Date Balance Outstanding at Close of This Period 45000.00 0.00
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Date Incurred Date Du	ue Interest Rate Secured
10 04 1996 2/28/02	8 090 % (apr) Yes No
	Transaction ID: SC/10.4132
Full Name (Last, First, Middle Initial) Gordon H Smith	Name of Employer U S Senate
Mailing Address 1101 Skyline Drive	Occupation Senator
City State ZIP Code Pendleton OR 97801	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
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Full Name (Last, First, Middle Initial)	Name of Employer
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City State ZIP Code	Amount Guaranteed Outstanding
Full Name (Last, First, Middle Initial)	Name of Employer
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	Amount ************************************
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LOAN SOURCE Full Name (Last, First,	Middle Initial)	Election	_
U S. National Bank of Oregon		X Primary General	
Mailing Address 555 SW Oak St		Other (specify) ▼	
City Portland	State OR ZIF	P Code 97204	_
Original Amount of Loan	Cumulative Payme	ent To Date Balance Outstanding at Close of This	Per
3000.00	more ; managamanger mayamangama)	30000 00 0.0	0
TERMS Date Incurred	Date	Due Interest Rate Secured.	
10 31 1996	2/28/02	8 090 % (apr) Yes	
		Transaction ID: SC/10.4136	 3
Full Name (Last, First, Middle Initial) Gordon H. Smith		Name of Employer U. S. Senate	
Mailing Address		Occupation	
1101 Skyline Drive		Senator	
City Stat	te ZIP Code	Amount 0 0 00	
Pendleton OR		Outstanding:	_
Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	_
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ATTACHMENT D

AFFIDAVIT OF LISA LISKER

Lisa Lisker, having been duly sworn, deposes and states as follows:

- 1. I am over 18 years of age and have personal knowledge of the information set forth in this affidavit.
- 2. I am the Assistant Treasurer of Gordon Smith for U.S. Senate Committee, Inc. (96) and have personal knowledge of the matter stated herein.
- 3. In May, 2002, the Committee was contacted by the Reports Analysis Division ("RAD") regarding activity relating to a U.S. Bank loan from 1995/96.
- 4. At the time the Committee was contacted, Senator Smith had already paid in full the U.S. Bank loan, however the information provided to me by the Committee as of May 2002 did not include this information and therefore, it was not included on previous Committee FEC filings.
- 5. In 2002, in coordination with RAD, and based on the information provided to me by the Committee, I filed an amendment to the Committee reports showing the full payment of the U.S. Bank loan in 2000.
- 6. For administrative clarity, and on the instructions of RAD, the amendment listed a one-time payment only.

Further affiant sayeth not.

Lisa Lisker

Subscribed to and sworn before me this day of December, 2002.

Votary Public

My commission expires

ATTACHMENT E

UNITED ST	STATES SENATE PUBLI	ATE PUBLIC FINANCIAL DISCLOSURE REPORTIUAL AND TERMINATION REPORTS	L DISCLOSI	URE REPOI S	RT		
Last Name	First Name and Middle Initial	Annual Report		Senate Office / Agency in Which Employed	Which Employed		
Smith	Gordon H.	Calendar Year Covered by Report	y Report				
Mailing Address (Number, Street, City, State, and ZIP Code)	Telephone No (Include Area Code)	Termination Report		Prior Office / Agency in Which Employed	hich Employed		
Inited States Senate		Termination Date (Mo , Day, Yr.)	Jay, Yr.).	,			
	(202) 224–3573						
AFTER READING THE INSTRUCTIONS	CTIONS - ANSWER EACH		OF THESE QUESTIONS AND ATTACH THE RELEVANT	IND ATTACH	THE RELE		PART
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, Complete and Attach PART I.	ity in lieu of ting period? YES NO X	Did you, your spouse, or dependent bursements for travel in the reporting source)? If yes, Complete and Attach PART VI.	Did you, your spouse, or dependent child receive any reportable travel or reimbursements for travel in the reporting period (i.e., worth more than \$250 from one source)? If yes, Complete and Attach PART VI.	seive any reportable tr .e., worth more than \$	ravel or reim- 250 from one	YES	NO X
Did you or your spouse have earned income (e.g., salaries or fees) or non-investment income of more than \$200 from any reportable source in the reporting period? If yes, Complete and Attach PART II.	able source YES X NO	Did you, your spouse, \$10,000) during the rep If yes, Complete and A	Did you, your spouse, or dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, Complete and Attach PART VII	e any reportable liabili	ty (more than	YES	
Did you, your spouse, or dependent child receive unearned or investment income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, Complete and Attach PART IIIA and/or IIIB.	d or invest- or hold any YES X NO	Did you hold any reportable positions calendar year? If yes, Complete and Attach PART VIII.	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, Complete and Attach PART VIII.	efore the date of filing	in the current	YES	
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than \$1,000 in the reporting period? If yes, Complete and Attach PART IV	or exchange YES X NO	Do you have any repor If yes, Complete and A	Do you have any reportable agreement or arrangement with an outside entity? If yes, Complete and Attach PART IX	ingement with an outsi	de entity?	YES	×
Did you, your spouse, or dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$250 and not otherwise exempt)? If yes, Complete and Attach PART V	rable gift in YES NO X	If this is your FIRST Re from a single source in If yes, complete and at	If this is your FIRST Report: Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Part X.	ompensation of more t	han \$5,000	YES	×
File this report and any amendments with the Secretary of the Senate, Office of Public Records, Room 232, Ha Office Building, U.S. Senate, Washington, D.C. 20510. \$200 Penalty for filing more than 30 days after due date	ents with the Secretary call shington, D.C. 20510.	Secretary of the Senate, Office of Public Records, Room 232, Hart Senate 3. 20510. \$200 Penalty for filing more than 30 days after due date.	Office of Put or filing more	olic Records, than 30 days	, Room 23, s after due	2, Hart S date.	Senate
This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The statement will be	ired by the Ethics in Governmen	it Act of 1978, as	amended. The sta	atement will be	For Official Use Only - Do Not Write Below This Com	- Do Nor Write Bel	low This Lmo
made available by the Office of the Secretary of the Senate to any requesting person upon written application and will be reviewed by the Select Committee on Ethics Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 6, 104, and 18 U.S.C. 1001.)	of the Senate to any requesting prividual who knowingly and willfully all sanctions. (See 5 U.S.C. app. (oerson upon writter / falsifies, or who k 6, 104, and 18 U.S	application and wand will snowingly and will s.C. 1001.)	vill be reviewed fully fails to file	(h.	ETARY O	
Certification Signature of Reporting Individual	g Indwidual		Date (Month, Day, Year)		Ü 		
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief.	Btu		August 8, 1997	7)	THE SENATE L: 44	
For Official Use Only - Do Not Write Below This Line	ow This Line					<u> </u>	
It is the opinion of the reviewer that the signature of Reviewing Official statements made in this form are in	g Official		Date (Month, Day, Year)		(
compliance with Title I of the Ethics in Government Act					(8)		
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. B.	Reporting Individual's Name	Name			1							Page	Page Number	Į.
	Gordon H.	Smith	1	PARI VII. LIABILITIES		מ							9	
	Report liabiliti	ies over \$1	Report liabilities over \$10,000 owed by you, your spouse, or dependent child, to	ouse, or dependent child, to any one					Category	y of Amount	unt of Val	of Value (x)		
	the reporting (2) loans secu	y time duri period. Ex ured by au	creditor at any time during the reporting period. Check the highest the reporting period. Exclude: (1) Mortgages on your personal res (2) loans secured by automobiles, household furniture or appliance	creditor at any time during the reporting period. Check the highest amount owed during the reporting period. Exclude: (1) Mortgages on your personal residences unless rented; (2) loans secured by automobiles, household furniture or appliances; and (3) liabilities					S. Marrier - 72 - 767		000	22000,000	000'000'09\$	000
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57	ample. John Jones	nes	Washington, D C	Promissory note	1986	10%	demand			×				Γ
-	First American Title InsuranceCO	rican uranceCO	Phoenix, Arizona	Mortgage on developed lot	1995	P+1	10yrs	ŧároji.		×				
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EXEMPTION TEST (see instructions before marking box): If you omitted any liability because it meets the three-part test for exemption described in the Instructions, please check here. ***This category applies only if the obligation was solely that of the spouse or dependent child If the obligation was the filer's or a joint obligation with the spouse or dependent child, use the other categones, as appropriate

Previous Editions Cannot Be Used

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Revised 1,

Last Name	First Name and Middle Initial	al Annual Report S	Senate Office / Agency in Which Employed	
		Calendar Year Covered by Report.		
Smith	Gordon H.	1997	U.S. Senator	
Senate Office Address (Number, Streel, City, State, and ZIP Code)	Telephone No (Include Area Code)	Termination Report	Prior Office / Agency in Which Employed	
United States Senate Washington, D.C. 20510	(202) 224–3573	Termination Date (Mo., Day, Yr.):		
AFTER READING THE INSTRUCTIONS - ANSWER EACH OF THESE QUESTIONS AND ATTACH THE RELEVANT PART	CTIONS - ANSWER EACH	HOF THESE QUESTIONS A	AND ATTACH THE REL	EVANT PART
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, Complete and Attach PART I.	riting period? YES NO X	Did you, your spouse, or dependent child receive any reportable travel or reimbursements for travel in the reporting period (i.e., worth more than \$250 from one source)? If yes, Complete and Attach PART VI	iceive any reportable travel or reimite, worth more than \$250 from one	YES NO X
Did you or your spouse have earned income (e.g., salaries or fees) or non-investment income of more than \$200 from any reportable source in the reporting period? If yes, Complete and Attach PART II	rable source YES X NO	Did you, your spouse, or dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, Complete and Attach PART VII	ve any reportable liability (more than	YES X NO
Did you, your spouse, or dependent child receive unearned or investment income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, Complete and Attach PART IIIA and/or IIIB	ed or invest- or hold any YES X NO	Did you hold any reportable positions on or before the date of tiling in the current calendar year? If yes, Complete and Attach PART VIII	efore the date of filing in the current	YES NO X
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than \$1,000 in the reporting period? If yes, Complete and Attach PART IV.	or exchange YES X NO	Do you have any reportable agreement or arrangement with an outside entity? If yes, Complete and Attach PART IX	angement with an outside entity?	YES NO X
Did you, your spouse, or dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$250 and not otherwise exempt?) If yes. Complete and Mach PART V	ortable gift in YES NO X	If this is your FIRST Report. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Part X.	compensation of more than \$5,000	YES NO

File this report and any amendments with the Secretary of the Senate, Office of Public Records, Room 232, Hart Senate \$200 Penalty for filing more than 30 days after due date. Washington, D.C. 20510. Senate, U.S. Office Building, For Official Use Only - Do Not Write Below This Line

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This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The statement will be made available by the Office of the Secretary of the Senate to any requesting person upon written application and will be reviewed by the Select Committee on Ethics. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 6, 104, and 18 U.S.C. 1001.

Signature of Reporting Individual I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief

Certification

Date (Month, Day, Year)

For Official Use Only - Do Not Write Below This Line

Signature of Reviewing Official It is the opinion of the reviewer that the statements made in this form are in compliance with Title I of the Ethics in Government Aci

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Date (Month, Day, Year)

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		Calendar Year Covered by Report:		
Smith	Gordon H.	1998	U.S. Senator	
Senate Office Address (Number, Street, City, State, and ZIP Code)	Telephone No (Include Area Code)	Termination Report	Pnor Office / Agency in Which Employed	
United States Senate		Termination Date (Mo., Day, Yr.)		
Washington, D.C. 20510	(202) 224-3573			
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Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? if yes, Complete and Attach PART I.	YES NO X	Did you, your spouse, or dependent child receive any reportable travel or reimbursements for travel in the reporting period (i.e., worth more than \$250 from one source)?	sive any reportable travel or reim- s., worth more than \$250 from one	YES NO X
Did you or your spouse have earned income (e.g., salaries or fees) or non-investment income of more than \$200 from any reportable source in the reporting period? If yes, Complete and Attach PART II.	YES X NO	Did you, your spouse, or dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, Complete and Attach PART VII	any reportable liability (more than	YES X NO
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Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than \$1,000 in the reporting period? If yes, Complete and Attach PART IV.	YES X NO	Do you have any reportable agreement or arrangement with an outside entity? If yes, Complete and Attach PART IX.	igement with an outside entity?	YES NO X
Did you, your spouse, or dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$250 and not otherwise exempt)? If yes, Complete and Attach PART V.	ortable gift in very res NO X	If this is your FIRST Report. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, complete and attach Part X.	mpensation of more than \$5,000	YES NO
File this report and any amendments with the Secretary of the Senate, Office of Public Records, Room 232, Ha Office Building, U.S. Senate, Washington, D.C. 20510. \$200 Penalty for filing more than 30 days after due date	nents with the Secretary of ashington, D.C. 20510. \$2	ie Secretary of the Senate, Office of Public Records, Room 232, Hart Senate C. C. 20510. \$200 Penalty for filing more than 30 days after due date.	olic Records, Room 232 than 30 days after due	, Hart Senate date.
This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The statement will be	uired by the Ethics in Government	Act of 1978, as amended. The sta	ternent will be For Official Use Only - Do Not Write Below 7	Do Not Write Below T
made available by the Office of the Secretary of the Senate	y of the Senate to any requesting pe	to any requesting person upon written application and will be reviewed	III be reviewed	

Signature of Reporting Individual

I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief

Certification

by the Select Committee on Ethics. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file

this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 6, 104, and 18 U.S.C. 1001.)

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It is the opinion of the reviewer that the statements made in this form are in compliance with Title I of the Ethics in Government Act

that the Signature of Reviewing Official are In

Date (Month, Day, Year)

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Gordon H. Smith Report liabilities over \$10,000 owed by you, your and the instructions, to any one creditor a Check the highest amount owed during the report your personal residences unless rented; (2) loans furniture or appliances; and (3) liabilities owed to company or example. Name of Creditor Address of Creditor Address of Creditor Address of Creditor Address of Creditor Milton-Freewater, OR Smith Frozen Weston, OR Brittany Farming Milton-Freewater, OR Brittany Farming Milton-Freewater, OR Brittany Farming Milton-Freewater, OR Company OR	25044131772 PART VII. LIABI		it any time during the reporting period. ing period. Exclude: (1) Mortgages on secured by automobiles, household	certain relatives listed in Instructions. counts.	Type of Liability	Mortgage on undeveloped land	Promissory note EXAMP	Promissorv Note	Promissory Note	Promissory Note-Proceeds used for Gordon Smith for US Senate Campai	Promissory Note-Proceeds used to purchase Maryland Residence	Promissory Note							
Gordon H. Smith Report liabilities over \$1 3, Part B of the Instruction Check the highest amou your personal residence furniture or appliances; See Instructions for reponse Instructions for reponse Instructions for reponse Instructional Bank Smith Frozen Foods US National Bank Smith Food Sales, Inc. Brittany Farming Company		0.000 owed by vou. vour s	ons), to any one creditor a int owed during the reporting unless rented; (2) loans	and (3) liabilities owed to c orting revolving charge acc	Address of Creditor	1	l .	Milton-Freewater, OR	i	1	1	Milton-Freewater, OR							
1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ual's Name	oilities over \$10	of the Instructic e highest amou sonal residence	or appliances; & tructions for repo	e of Creditor	First District Bank		ett ing Co.	h Frozen s	l	h Food								

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EXEMPTION TEST (see instructions before marking box): If you omitted any liability because it meets the three-part test for exemption described in the Instructions, please check here. ***This category applies only if the obligation was solely that of the spouse or dependent child. If the obligation was the filer's or a joint obligation with the spouse or dependent child, use the other categories, as appropriate Revised

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AMENDED

Smith Senate Office Address (Number, Streef, City, State, and ZIP Code) United States Senate Washington, D.C. 20510 AFTER READING THE INSTRUCTIONS - ANS	Initial	A	Separa Office / Agency in Which Employed	
		Annual report	The second secon	пріоува
		Calendar Year Covered by Report:		i
2		1999	U.S. Senator	
- 10	Senate Office Telephone No (include Area Code)	Termination Report	Prior Office / Agency in Which Employed	beyol
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Duo any individual or organization make a donation to charity in lieu or paying you for a speech, appearance, or article in the reporting period? If yes, Complete and Attach PART I.	X ON	Did you, your spouse, or dependent child receive any reportable travel or reimbursements for travel in the reporting period (i.e., worth more than \$260 from one source)? If yes, Complete and Attach PART VI.	receive any reportable travel or I (i.e., worth more than \$260 fron	reim- m one YES NO X
Did you or your spouse have earned income (e.g., salaries or fees) or non-lavestment income of more than \$200 from any reportable source in the reporting period? If yes, Complete and Attach PART II.	ON X	Did you, your spouse, or dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, Complete and Attach PART VII.	ave any reportable liability (more	e than YES X NO
Did you, your spouse, or dependent child receive unearned or investment income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, Complete and Attach PART IIIA and/or IIIB.	NO X	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, Complete and Attach PART VIII.	before the date of filing in the c	vurrent YES NO X
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than \$1,000 in the reporting period? YES if yes, Complete and Attach PART IV.	X NO	Do you have any reportable agreement or arrangement with an outside entity? If yes, Complete and Attach PART IX.	rrangement with an outside entity	y? YES NO X
Did you, your spouse, or dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$260 and not otherwise exempt)? If yes, Complete and Attach PART V.	X ON	If this is your FIRST Report: Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, Complete and attach Part X.	compensation of more than \$5,0	OOO YES NO
File this report and any amendments with the Soffice Building, U.S. Senate, Washington, D.C.	ne Secretary or .C. 20510. \$20	Secretary of the Senate, Office of Public Records, Room 232, Hart Se 20510. \$200 Penalty for filing more than 30 days after due date.	ublic Records, Roothan 30 days afte	Room 232, Hart Sente after due date.
This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The statement will be made available by the Office of the Secretary of the Senate to any requesting person upon written application and will be reviewed by the Select Committee on Ethics. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5.11.S.C. and 18.11.S.C. 1001.)	to any requesting per youngly and willfully and willfully and willfully and willfully and willfully and any or the second	in Government Act of 1978, as amended. The statement will be yr requesting person upon written application and will be reviewed gly and willfully falsifies, or who knowingly and willfully falsifies to file 11.5.C. and 6, 104, and 18, 11.5.C. and 6.		뢷
Certification Signature of Reporting Individual		Date (Month. Day. Year)		eet J
in statements I have im and all attached e, complete and cording my knowledge and	The state of the s	7 74	3	TARY OF TH JN -7 Ph H.D.
For Official Use Only - Do Not Write Below This Line				
It is the opinion of the reviewer that the signature of Reviewing Official statements made in this form are in compliance with Title I of the Fithics in		Date (Month, Day, Year)		
Government Act. Previous Editions Cannot Be Used				Revised 3/0

porting individual's Name	PART VII. LIABILITIES	Page Number
Gordon H. Smith		9
Peport liabilities over \$10,000 o	Report liabilities over \$10.000 owed by you, your spouse, or dependent child (see page	Category of Amount of Value (x)

\$12,000 Date Interest Jermily your personal residences unless rented; (2) loans secured by automobiles, household fur-Check the highest amount owed during the reporting period. Exclude: (1) Mortgages on niture or appliances; and (3) liabilities owed to certain relatives listed in Instructions. See 3, Part B of the Instructions), to any one creditor at any time during the reporting period. Report liabilities over \$10,000 owed by you, your spouse, or dependent child (see page Instructions for reporting revolving charge accounts.

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	Garrett Packing Co.	Milton-Freewater, OR	Promissory Note	1994	8% 8%	on « deman		×				
⊳ ∾_	Smith Frozen Foods	Weston, OR	Promissory Note	Var	6.5%-	on demand		***	X			(0.20 C) A
3	US National	Bank Portland, OR	omissory Note-Proceeds used for cdon Smith for US Senate Campa:	\$661 8u-2	8.09%	/5/% Vears			×			
N ₄	Smith Food Inc.	Sales, Pendleton, OR	Promissory Note-Proceeds used to purchase Maryland Residence	1.997	6.5% de	onwel					200	WEST STATE
ις	Brittany Farming Company	Milton-Freewater, OR	Promissory Note	1.661	8% de	on demand	X				300000	Y AND
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EXEMPTION TEST (see instructions before marking box): If you omitted any liability because it meets the three-part test for exemption described in the Instructions, please check here. ***This category applies only if the obligation was solely that of the spouse or dependent child. If the obligation was the filer's or a joint obligation with the spouse or dependent child, use the other categories, as appropriate.

UNITED ST	STATES SENATE PÜBÜ	TE PÚBEIC FINANCÍAL DISCLOSURE JAL AND TERMINATION REPORTS	SSURE REPORT	łΤ	
Last Name	First Name and Middle Initial	Annual Report	Senate Office / Agency in Which Employed	Which Employed	
		Calendar Year Covered by Report:			
Smith	Gordon H.	2000	U.S. Senator	•	
Senate Office Address (Number, Street, City, State, and ZIP Code)	Senate Office Telephone No (Include Area Code)	Termination Report	Prior Office / Agency in Which Employed	ich Employed	
. United States Senate Washington, D.C. 20510	(202) 224–3753	Termination Date (Mo., Day, Yr.):			
AFTER READING THE INSTRUCTIONS -	TIONS - ANSWER EACH	HOF THESE QUESTIONS	S AND ATTACH THE RELEVANT	THE RELEVA	INT PART
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, Complete and Attach PART I	y in lieu of NES NO X .	Did you, your spouse, or dependent child receive any reportable travel or reimbursements for travel in the reporting period (i.e., worth more than \$260 from one source)? If yes, Complete and Attach PART VI.	id receive any reportable tra lod (i.e , worth more than \$2	YES	NO X
Did you or your spouse have earned income (e.g., salaries or fees) or non-investment income of more than \$200 from any reportable source in the reporting period? If yes, Complete and Attach PART II.	or fees) or ble source YES X NO	Did you, your spouse, or dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, Complete and Attach PART VII.	s have any reportable liability	/ (more than YES	NO X
Did you, your spouse, or dependent child receive unearned or investment income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, Complete and Attach PART IIIA and/or IIIB.	or invest- r hold any YES X NO	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, Complete and Attach PART VIII.	or before the date of filing in	the current YES	NO X
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than \$1,000 in the reporting period? If yes, Complete and Attach PART IV	exchange YES X NO	Do you have any reportable agreement or arrangement with an outside entity? If yes, Complete and Attach PART IX	r arrangement with an outsid	e entity? YES	NO X
Did you, your spouse, or dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$260 and not otherwise exempt)? If yes, Complete and Attach PART V	hot other. YES NO \overline{X}	If this is your FIRST Report. Did you receive compensation of more than \$5,000 from a single source in the two prior years? If yes, Complete and attach Part X	ive compensation of more the	an \$5,000 YES	ON
File this report and any amendments with the Office Building, U.S. Senate, Washington, D.C.	ents with the Secretary on the Shington, D.C. 20510. \$20	Secretary of the Senate, Office of Public Records, Room 232, Hart Senate . 20510. \$200 Penalty for filing more than 30 days after due date.	Public Records, e than 30 days	Room 232, I after due dat	Hart Senate e.
This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended. The statement will be made available by the Office of the Secretary of the Senate to any requesting person upon written application and will be reviewed by the Select Committee on Ethics. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app 6, 104, and 18 U.S.C. 1001.)	red by the Ethics in Government of the Senate to any requesting pridual who knowingly and willfully a sanctions. (See 5 U.S.C. app 6	in Government Act of 1978, as amended. The ny requesting person upon written application a gly and willfully falsifies, or who knowingly and 5 U.S.C. app 6, 104, and 18 U.S.C. 1001.)		For Official Use Only - Do Not Write Below This Line	or Write Below This Line CRETARY
Certification Signature of Reporting Individual	Individual	Date (Month, Day, Year)	η.	15	
I CERTIFY that the statements I have made on this form and all attached schedules are true, complete and correct to the best of my knowledge and belief	A Sal	101	lay Ol	11: 25 0	THE SEN
For Official Use Only - Do Not Write Below This Line	w This Line			, -	ATE
It is the opinion of the reviewer that the signature of Reviewing Official statements made in this form are in compliance with Title I of the Ethics in Government Act	Official	Date (Month, Day, Year)	0		
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. Report	Reporting individual's Name		Salti lidal I liv taad	ITIES								_	Page Number	rage.	_
ડુ	Gordon H. Smith	1	TABL VIII. LIABL										6		
Be .	port liabilities over \$1	Report liabilities over \$10,000 owed by you, your spouse, or						Cate	gory o	f Amo	Category of Amount of Value (x)	Value ()	×		
က် ဋ ဋ 	Part B of the Instruct. eck the highest amor ir personal residence	3, Part B of the Instructions), to any one creditor at any time Check the highest amount owed during the reporting period. your personal residences unless rented; (2) loans secured by pitting or appliances; and (3) liabilities out of appliances.	3. Part B of the Instructions), to any one creditor at any time during the reporting period. Check the highest amount owed during the reporting period. Exclude: (1) Mortgages on your personal residences unless rented; (2) loans secured by automobiles, household furniture or appliances; and (3) liabilities ound to cortain polytical liabilities.			•••		000,0		000,000		22,000,000	000,000,85	000	
Ins	tructions for reporting	instructions for reporting revolving charge accounts.	reigiives iisted in instructions, see	410	Interest		91 \$ - 1 0	01\$-10	24 · 100	2\$ - 100 13 - 100	0'000'1\$	100'0	*********	'000'09\$ 	laaalaaa
	Name of Creditor	Address of Creditor	Type of Liability		<u></u>			0'05\$		سنسسن		00 ⁴ 1\$			
S DC	Example: First District Bank	Washington, DC EXAMPLE	Mortgage on undeveloped land EXAMPLE	1861	13%	¥.	<u>.</u> ``	×	*:	잛	AM	2			Γ
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44. 7 O ک	Chase Manhattan Mortgage	Louisville, KY	issory		8.5%	30			::.		<u> </u>	×	†	ļ	1
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EX.	EMPTION TEST <i>(see ins</i> is category applies only if the obliga	EXEMPTION TEST (see instructions before marking box): If you omit "This category applies only if the obligation was solely that of the spouse or dependent child If the obli	you omitted any liability because it meets the three-part test for exemption described in the Instructions, please check here. In the obligation was the filer's or a joint obligation with the spouse or dependent child, use the other categones, as appropriate	rt test for e) Ident child, use	cemption the other cat	described gones, as app	in the	Instru	ctions	, plea	ise ch	eck F	ere.		

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ATTACHMENT F

SCHEDULE A (FEC FORM 3)	Use separate schedule(s)	(check only one)
TEMIZED RECEIPTS	for each category of the	(check only one)
	Detailed Summary Page	11a 11b 11c 11d 12 13a 13b 14 15
Any information copied from such Reports and Statements ma	ay not be sold or used by any per	son for the purpose of soliciting contributions
or for commercial purposes, other than using the name and a	ddress of any political committee	to solicit contributions from such committee
NAME OF COMMITTEE (IN FUII) GORDAN SMITH FOR U S SENATE COMMI	TTEE (96)	
Full Name (Last, First, Middle Initial) 4. Gordon H. Smith		Date of Receipt
Mailing Address		LWAM 1 LOND 1 LARAGASA
	Zıp Code	- 0.5 0.2 $2.0.0.0$
Pendleton OR	97801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		1634427826
Name of Employer Occupation	1	Loan from Personal Funds
U.S. Senate Senato		received from Portland Mortgage
	Cycle-to-Date ▼	7
	229.25.3504	
		Transaction ID: SA13A.4217
Full Name (Last, First, Middle Initial) 3.		Date of Receipt
Mailing Address		MUMI, BUDI, TOVIVEY
City State	Zip Code	Amount of Each Receipt this Period
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Name of Employer Occupation	1	
Receipt For. Election C	Cycle-to-Date ▼	7
Other (specify) ▼		
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		MPW / DEO / VOVEVEV
City State	Zıp Code	Description of Forth Property in Property in the Property in t
		Amount of Each Receipt this Period
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Name of Employer Occupation	1	
Receipt For. Election C	Cycle-to-Date ▼	1
Primary General Other (specify) ▼		
SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page this line number only)	· · ······· · · · · · · · · · · · · ·	

SCHEDULE C (FEC Form 3) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

	160			
AME OF COMMITTEE (In Full)				
GORDON SMITH FOR US SENATE COMMITTEE INC, (96)				
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election.			
Gordon H. Smith - Personal Funds received from Portland Primary				
Mortgage, 2020 SW 4th Ave., Ste 1010, Portland, OR 97201 X General				
Mailing Address				
1101 Skyline Drive				
City Pendleton State OR ZIP Code 97801				
Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period				
L	0, . 00			
TERMS	Internal Bate			
Date Incurred Date Due	Interest Rate Secured:			
	0-0-2 (apr) Yes No			
List All Endorsers or Guarantors (if any) to Loan Source				
Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address	Occupation			
	Amount			
City State ZIP Code	Guaranteed			
City State ZIF Code	Outstanding:			
2. Full Name (Last, First, Middle Initial)	Name of Employer			
Mailing Address	Occupation			
	Amount			
City State ZIP Code	Guaranteed Outstanding:			
3. Full Name (Last, First, Middle Initial) Name of Employer				
Mailing Address	Occupation			
	Amount			
City State ZIP Code	Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial) Name of Employer				
Mailing Address Occupation				
Mailing Address	Occupation			
	Amount			
City State ZIP Code	Guaranteed Outstanding:			
UDTOTALC The Denot This Pers (estable)				
SUBTOTALS This Period This Page (optional)				
OTALS This Period (last page in this line only)				
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.				